|  |  |
| --- | --- |
|  | Application for Teacher-Led PLC2019-2020 |

# Application to be completed by proposed PLC Lead.

##  Participant Information

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Name of PLC Lead: |  |  |  | Total # of Participants: |   |
|   |  |  |  |  *(including PLC Lead)* |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Names of Confirmed Participants: |  |  |  |
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|  |  |  |  |  |  |  |

##  Meeting Information

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| --- | --- | --- | --- |
| Desired Number of Meetings: |  |  Desired Length of Meetings: |  |

*(suggested range: 4-9) (suggested length: 1-1.5 hrs.)*

|  |  |  |
| --- | --- | --- |
| Window of Completion *(i.e. weeks or months in which meetings will take place)*: |  |  |

|  |  |
| --- | --- |
| Planned Place/Time of Meetings: |  |

*(e.g. Rm 6 before school, library from 3:30-4:30, etc.)*

## Outcome Information

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| --- |
| Objective of the PLC *(with measurable student achievement)*: |
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| --- |
| Rationale for Selected Objective: |
|  |

## Signatures

|  |  |  |  |
| --- | --- | --- | --- |
| Signature of Applicant: |  | Date: |  |
| Signature of Principal: |  | Date: |  |
|  |  |  |  |